


FILE NOW: FILING FEE IS \$61.25

FILED

Apr 30 1998 8:00am  
Secretary of State

<b>NONPROFIT CORPORATION ANNUAL REPORT 1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000002996 (5)**

1. Corporation Name

**HOMEOWNERS' ASSOCIATION OF SADDLE HILL SUBDIVISION, INC.**

Principal Place of Business

Mailing Address

**1379 SADDLE COURT  
PALM HARBOR FL 34683  
US**

**1379 SADDLE COURT  
PALM HARBOR FL 34683  
US**

3. Date Incorporated or Qualified

**06/22/1995**

4. FEI Number

**59-3394535**

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

**21 1367 SADDLE CT.**

**26 SAME**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**22 P**  
**23 PALM HARBOR, FL.**

City & State

City & State

**24 34683** **25 PINELLAS**

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐

**\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BENESHAN, WILLIAM  
1379 SADDLE COURT  
PALM HARBOR FL 34683**

81 Name

**STEVEN F PASQUALI**

82 Street Address (P.O. Box Number is Not Acceptable)

**1367 SADDLE CT**

83

84

**Palm Harbor, FL**

**FL**

**34683**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

*[Signature]*

(NOTE: Registered Agent signature required when reinstating)

**7/18/98**

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME **SD**

1.2 NAME

STREET ADDRESS **NIZER, RAY**

1.3 STREET ADDRESS

CITY-ST-ZIP **1343 SADDLE COURT**

1.4 CITY-ST-ZIP

**PALM HARBOR FL**

TITLE ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME **PD**

2.2 NAME

STREET ADDRESS **JOHANNSEN, LAWRENCE E.**

2.3 STREET ADDRESS

CITY-ST-ZIP **1426 SADDLE COURT**

2.4 CITY-ST-ZIP

**PALM HARBOR FL**

TITLE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME **VD**

3.2 NAME

STREET ADDRESS **PASQUALI, STEVEN**

3.3 STREET ADDRESS

CITY-ST-ZIP **1367 SADDLE COURT**

3.4 CITY-ST-ZIP

**PALM HARBOR FL**

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME **TD**

4.2 NAME

STREET ADDRESS **RAY, JOHN**

4.3 STREET ADDRESS

CITY-ST-ZIP **1414 SADDLE COURT**

4.4 CITY-ST-ZIP

**PALM HARBOR FL**

TITLE ☒ DELETE

5.1 TITLE ☒ Change ☐ Addition

NAME **D**

5.2 NAME

STREET ADDRESS **BENESHAN, WILLIAM**

5.3 STREET ADDRESS

CITY-ST-ZIP **1379 SADDLE COURT**

5.4 CITY-ST-ZIP

**PALM HARBOR FL**

**PALONLY, DENNIS**

**1463 SADDLE CT.**

**PALM HARBOR, FL 34683.**

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY-ST-ZIP

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*[Signature]*

**4/22/98**

**813934-0800**

CP2E037 (10/97)